

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000020281

FILED
Aug 28, 2008
Secretary of State

Entity Name: ALL PHASE CONSTRUCTION AND DESIGN, LLC

Current Principal Place of Business:

2849 NE 23RD AVENUE
LIGHTHOUSE POINT, FL 33064 US

New Principal Place of Business:

1301 WEST COPANS ROAD
D6
POMPANO BEACH, FL 33064 US

Current Mailing Address:

2849 NE 23RD AVENUE
LIGHTHOUSE POINT, FL 33064 US

New Mailing Address:

1301 WEST COPANS ROAD
D6
POMPANO BEACH, FL 33064 US

FEI Number: 20-8593933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HORNSTEIN, BRUCE H
317-71ST STREET
MIAMI BEACH, FL 33141 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SARGENT, BARBARA
Address: 2849 NE 23RD AVENUE
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: MGRM () Delete
Name: BURNS, RICHARD
Address: 2849 NE 23RD AVENUE
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BARBARA SARGENT

MGRM

08/28/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date